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STATEMENT OF

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FORM 1	ORGANIZATION	2013 SEP 26 AM 10: 25
NAME OF COMMITTEE (in	full) (Check if name Example:If typing, type over the lines.	12FE4M5
Friends of	George Demos	
ADDRESS (number a	PO Box 378	
(Check if ac is changed)		NY 11779
	CITY	STATE ZIP CODE
COMMITTEE'S E-MA (Check if is change		om, , , , , , , , , , , , , , , , , , ,
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if is changed	www.georgedemos.com	
2. DATE 09	25° (2013')	
3. FEC IDENTIFIC	CATION NUMBER	
4. IS THIS STATEM	MENT NEW (N) OR AMENDED (A)	
I certify that I have e	examined this Statement and to the best of my knowledge and belief it is	s true, correct and complete.
Type or Print Name of	Robert Cole	
Signature of Treasure	or Ptm Cen	Date 09" / 25° / 2013.
NOTE: Submission of	false, erroneous, or incomplete information may subject the person signing thi ANY CHANGE IN INFORMATION SHOULD BE REPORTED WIT	
Office Use	For further information cor Federal Election Commission Toll Free 800-424-9530	

FEC Form 1 (Revised 02/2009)	Page 2			
TYPE OF COMMITTEE				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information below	DW.)			
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (C information below.)	Complete the candidate			
Name of Candidate George Demos				
Candidate Office Party Affiliation REP Sought: House Senate President	State NY District 01			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	1211271 s			
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Political Action Committee (PAC):	· · · · · · · · · · · · · · · · · · ·			
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected organization is a:			
	1			
Corporation Corporation w/o Capital Stock	Labor Organization			
Membership Organization Trade Association	Cooperative			
In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
In addition, this committee is a Lobbyist/Registrant PAC.	In addition, this committee is a Lobbyist/Registrant PAC.			
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fundraising Representative:				
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for	or two or more political			
committees/organizations, at least one of which is an authorized committee of a federal candidate				
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	or two or more political			
Committees Participating in Joint Fundraiser				
1				
2				
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Write or Type Committee Na		~ g
Friends of Geo	rge Demos	
	Organization, Atfiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	eted Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
7. Custodian of Records: lo	dentify by name, address (phone number optional) and position of the person in po	essession of committee
Full Name Robe	ert Cole	
Mailing Address	PO Box 378	1 1 1 1 1 1
	<u> </u>	
	Ronkonkoma NY 1177	79
Title or Position	CITY STATE	ZIP CODE
Custodian of Re	ecords Telephone number	
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the n	ame and address of
Full Name of Treasurer	ert Cole	
Mailing Address	PO Box 378	
	Ronkonkoma NY 1177	79 - LI
Title or Position Treasurer	Telephone number	

CITY

STATE

ZIP CODE

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Robert Cole

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